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**TESTIMONY RE: H.B No. 5258 (Raised) AN ACT IMPLEMENTING THE  
RECOMMENDATIONS OF THE PROGRAM REVIEW AND  
INVESTIGATIONS COMMITTEE CONCERNING SCOPE OF PRACTICE  
DETERMINATIONS FOR HEALTH CARE PROFESSIONS.**

Program Review and Investigations Committee

Public Health Committee

Thursday, February 25, 2010

Good morning Senator Kissel, Representative Muchinsky, and members of the Program Review and Investigations Committee and Senator Harris, Representative Ritter and members of the Public Health Committee.

Thank-you for the opportunity to provide testimony on behalf of the Connecticut Nurses' Association (CNA), the professional organization for registered nurses in Connecticut. I am Dr. Mary Jane Williams, current chairperson of its Government Relations Committee and professor and chair of nursing at the University of Hartford. I have practiced nursing for over 40 years and have been educating nurses in Connecticut in both the public and private sector for over 35 years.

I am speaking in **strong opposition** to Raised Bill No. 5258, An Act Implementing the Recommendations of the Program Review and Investigations Committee Concerning Scope of Practice Determinations for Health Care Professions.

I understand the huge dilemma faced by the Public Health Committee members who seek an objective solution to issues that address scope of practice. I agree that we all need resolution of this difficult dilemma.

The dedication and research which went into this process is to be commended. The summary of the findings is exemplary. The decision to move forward with this legislation however, is not in the best interest of the 140,000 licensed health professions that would have to utilize the process created to address with "Scope of Practice Determinations."

The current proposed legislation does not reflect the best practice regarding scope of practice procedures. It will create a system that will be time intensive and subjective at best. What I find most disturbing is the fact that this proposed legislation resembles the American Medical Association (AMA) template "Creation of State-based Scope-of-Practice Review Committees" (2008). This proposal is a direct attempt to move all scope of practice determinations under the jurisdiction of the AMA and is a national movement that has created extremely hostile environments in other states.

My esteemed colleagues will present issues related to all of the states currently being challenged legislatively related to scope of practice determination. I would like to present a different perspective.

Nursing is one of the largest health care professions regulated at the state level through scope of practice legislation. These statutes also articulate the licensing requirements. Professions are typically regulated by statute, with the responsibilities of enforcement delegated to state regulatory agencies and boards or commissions.

Nursing is an autonomous profession, which means nurses have a high degree of control of their own affairs: *"Professionals are autonomous insofar as they can make independent judgments about their work"* this usually means *"the freedom to exercise their professional judgment."* Nursing in Connecticut as a profession has demonstrated its ability to make and exercise professional judgment. Nursing in Connecticut has

consistently demonstrated its ability to self regulate, and hold accountable its members through the Board of Examiners for Nursing (BOEN).

The nursing profession enjoys high social status, regard and esteem which is conferred upon them by society. Nursing is viewed as the **most trusted profession** by the public in virtually every survey conducted during the last decade. **This high esteem arises primarily from the higher social function of their work, which is regarded as vital to society as a whole and thus of having a special and valuable nature. If this is a true statement why would we need another professional group to participate in determining our scope of practice, especially in view of the fact that we as nurses are in the best position to determine our practice.**

The nursing profession involves technical, specialized and highly skilled work often referred to as "*professional expertise*." Education for this work involves obtaining degrees and professional qualifications without which entry into the profession is barred. Education also requires regular updating of knowledge and skills that facilitates the incorporation of this new knowledge in order to maintain expert competence and public safety. This is accomplished through continuing education, especially at the advanced levels for continuing certification.

Nursing is late in recognizing its potential power and has inadvertently allowed other health care professionals to attempt to utilize their power to control provider practice. This represents a restraint of trade. This legislation would allow one profession to regulate and protect its area of expertise and the conduct of its members, and to exercise a dominating influence over its entire field which means that the profession can act monopolist, rebuffing competition from other professional health care providers as well as subordinating and controlling lesser but related health care providers.

The current proposed legislation is a result of nursing's attempt to legislate the expansion of scope of practice and the medical professions attempt to delimit practice and control providers. The data analyzed in this review supports the request of the nursing

community. But the legislative proposal as constructed without the development of the proper infrastructure has the potential of putting all the power into the wrong hands.

Therefore if we recognize nursing as a profession, based on the tenets of a profession, that nursing is autonomous and self regulating, we must also make regulations for nurses and its members that facilitate its determination of scope of practice without the current impediments that continue to inhibit nurses from functioning at their level of education, experience and current scope of practice.